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| **заявление** | | | | | | | | | | | | | |
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*фамилия*

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*имя*

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*отчество*

*(Дата рождения)*

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*(контактный телефон)*

Наименование документа, удостоверяющего личность:

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Реквизиты документа, удостоверяющего личность:

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| Серия |  |  |  |  | Номер |  |  |  |  |  |  |  |  |  |  |

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| Пол: |  | мужской |  | женский |

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| СНИЛС |  |  |  |  |  |  |  |  |  |  |  |  |  |

Прошу зарегистрировать меня для участия в итоговом

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| **сочинении** |  | **изложении** |  |  |

для получения допуска к государственной итоговой аттестации по образовательным программам среднего общего образования.

Прошу организовать проведение итогового сочинения (изложения) в условия, учитывающие состояние здоровья, особенности психофизического развития, подтверждаемые:

оригиналом или надлежащим образом заверенной копией рекомендации ПМПК

Оригиналом или надлежащим заверенной копией справки, подтверждающей факт установления инвалидности, выданной ФГУ МСЭ

Необходимые условия проведения итогового сочинения (изложения)

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C Памяткой о порядке проведения итогового сочинения (изложения) ознакомлен (-а)

Подпись заявителя \_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Ф.И.О.)

«\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_ г.

Подпись родителя (законного представителя) несовершеннолетнего участника итогового сочинения (изложения)\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Ф.И.О.)

«\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_ г.

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Регистрационный

номер